DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH EATING & DRINKING ESTABLISHMENT / FOOD ESTABLISHMENT INSPECTION REPORT

SHI		FAC	YROTAVA	LES and L	INS	SPECTION REPORT
REASON		1 7	GRADE	Inspection	Date:	ESTABLISHMENT NAME:
Regular		V		5/3/	8	PAYLESS SUPERMARKETS - SUMAY AGAT
Follow-Up		a fire	niao o liae	Time In	Time Out	IOWNER/OPERATOR:
Complaint		pest	RATING	11:15 AM	Z=00 PM	PAYLESS MARKETS INC. on book and esten de monor
Investigation						LOCATION: # 137 PEDRO 16 Establishment Type:
Other:	100		A	Sanitary P	ermit No.:	ROBERTO DR. SANTA RITH MANUFACTURER
		-	MAGU	20000-	170001911	PERMIT STATUS: Valid TemporaryExpired
						e operations and facilities which must be corrected by the next inspection,
					W.M., D.M., C., C. (20)	may result in downgrading or permit suspension. To appeal, a written
ITEM*	nea	ring m	ust be subm		MARKS	d correction date. DEMERIT CORRECT BY
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					bilay biscald	
I have rea	ad a	ınd uı	nderstand	the above	violation(s	(s) and I am aware of the corrective measures that I must take.
*Note:	W	nen a	ny of the f	ollowing ite	ems are	Received By (Name & Title):
cited a	abo	ve, th	ey shall be	e corrected	within	5/3/18
	2110	0 day	s of this in	spection:	Ð	DEH Inspector (Name & Title): / INSEMBIG
(1), (3),	(11)), (12), (27), (28	3), (30), (41) & (45).	J. GARCIANEPHOL/ C. TAKASE EPHOLO
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